BULLETIN ON AGEING

No. 2/1992

WITH THIS ISSUE of the Bulletin on Ageing, *the United Nations Office at Vienna, Centre for Social Development and Humanitarian Affairs (UNOV/CSDHA) continues to contribute to a global information campaign on ageing for 1992 and beyond by communicating news of the latest developments around the world in the field of ageing. The United Nations strives to build partnerships with Governments and non-governmental organizations; United Nations bodies and organizations forge ahead with new agendas on ageing; and Member States provide the United Nations with summaries of national activities as a way of sharing information.*

To add life to the years that have been added to life, the General Assembly, by its resolution 46/91, adopted 18 United Nations Principles for Older Persons. Based on the International Plan of Action on Ageing, the Principles will serve as a new instrument for the second decade of the implementation of the Plan. Governments are encouraged to incorporate them into national programmes whenever possible. The Principles are reprinted in this issue of the Bulletin on Ageing *on page 11 and readers are encouraged to disseminate them.*

United Nations partnerships

Programme of Cooperation on Ageing for 1992-2001

Representatives of the China National Committee on Ageing (CNCA) visited UNOV/CSDHA on 4 and 5 May 1992. At the meeting, representatives of UNOV/CSDHA and CNCA signed a Programme of Cooperation on Ageing for 1992-2001 within the framework of the International Plan of Action on Ageing and the target-setting mandated by the General Assembly of the United Nations, in its resolutions 46/91 and 46/94, for the years 1992-2001. CNCA and CSDHA agreed to cooperate in specific areas, including exchanging information, exploring the feasibility of organizing expert group meetings in 1992 and 1993 on regional and national targets, establishing a regional training institute on ageing and

Henryk J. Sokalski, Director, Social Development Division, UNOV/CSDHA, and Wang Zhaohua, Chairman, CNCA, after signing the Programme of Cooperation on 4 May 1992 at Vienna

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examining the possibility of organizing olympic games for the elderly in the next decade.

Memorandum of Understanding for 1991-2001

In June 1992 representatives of UNOV/CSDHA and HelpAge International (HAI), signed a Memorandum of Understanding for 1991-2001. HAI is an international non-governmental organization in consultative status with the Economic and Social Council, and is a recipient of the Secretary-General's testimonial for service and support of the programme on ageing.

That Memorandum updates and expands a previous Memorandum signed in January 1991. As was agreed in the Memorandum, UNOV/CSDHA and HAI will work on activities in the areas of technical cooperation, training, target definition and information development. The activities will, in the spirit of Economic and Social Council resolution 1987/41 include the following: *(a)* establishing a technical cooperation network; *(b)* convening, subject to the availability of external resources, an interregional training seminar on project development; *(c)* extending training facilities; and *(d)* establishing further cooperative action on ageing in countries in change and transition. In particular, UNOV/CSDHA and HAI will examine the feasibility of convening a follow-up seminar to the successful seminar held at Vienna in July 1991 on the role of voluntary organizations of and for the elderly in Eastern European countries. Cooperation and collaboration on a number of specific information and awareness-raising activities will also take place within the framework of the Memorandum.

United Nations activities

Forty-eighth session of ESCAP

The forty-eighth session of the Economic and Social Commission for Asia and the Pacific (ESCAP) was held at Beijing in April 1992. Issues discussed at the session included ageing, especially with regard to changes in family structure. Decisions taken at the session will have far-reaching implications for economic and social development in the countries of Asia and the Pacific.

According to *Population Headliners*, the report of the Commission noted that:

> "With declining fertility, increasing life expectancy, urbanization and other changes in population variables as well as socio-economic development, a large number of countries were experiencing changes in family structure, with a general tendency away from the traditional extended families to nuclear families.
>
> "The reduction in family size and decline in the number of children per family had made the care of the elderly population an increasing concern in every society. Hence it was important to understand the interrelations among changes in family patterns, culture and tradition and of the support for the contribution of the elderly population."

Source: Population Headliners, No. 206, May 1992, published by the Population Division, ESCAP, United Nations Building, Bangkok 10200, Thailand.

International Labour Office

The International Labour Office, which acts as the secretariat of the International Labour Organisation (ILO), has recently published a booklet entitled *The ILO and the Elderly* to coincide with and commemorate the tenth anniversary of the adoption of the International Plan of Action on Ageing. In the foreword, the Director-General of the International Labour Office outlines the goals of ILO policies on ageing, which include: "... the prevention of age discrimination in employment and occupation, improved social protection, and preparation for and access to retirement, including the provision of a decent pension".

ILO, he says, is currently emphasizing the need to give older people the opportunity to pursue work or retirement, or a combination of these, as desired. This requires "flexible working conditions in old age, and improvement in the economic position of the elderly, training and retraining for any kind of activity, and flexible retirement schemes".

The 81-page booklet summarizes the activities and services the Office can offer to improve the situation of the elderly. Divided into nine chapters, it covers the following subjects: activities and services of the Office concerning the elderly; ILO standards concerning the elderly; old-age support, children and fertility; income security in old age; health care and health protection for the elderly; adequate working conditions for older workers; training of older people; statistics on older people, divided into age groups "55 and over" and "65 and over" as percentages of the total population, by region and selected country and giving the activity rate of persons of these age groups, also by region and selected country; and recent International Labour Office publications.

Available from: ILO Publications, International Labour Office, CH-1211 Geneva 22, Switzerland.

Nutrition and the elderly

The first global International Conference on Nutrition will take place from 5 to 11 December 1992, at Rome, Italy. Organized by the Food and Agriculture Organization of the United Nations (FAO) and the World Health Organization (WHO), the Conference will focus world attention on nutritional and diet-related problems, especially among nutritionally vulnerable groups.

Elderly people are increasingly at risk as populations age all over the world. Virtually nothing is known about the extent and severity of malnutrition in elderly people in developing countries, nor are there any guidelines on the measurement of

Production and assembly of electronic components in a small enterprise

Photo: ILO/J. Maillard

malnutrition in the elderly in the developing world. Without information and awareness about nutrition, elderly people may be overlooked in emergency and disaster situations. It has also been suggested that malnutrition detection in the elderly may be an early warning of famine, given that elderly people may be the first group to go without food in the event of food scarcity.

Information on the conference may be obtained from: FAO/WHO Joint Secretariat for the Conference, Viale delle Terme di Caracalla, 00100 Rome, Italy. Telephone: (39-6) 5797-3097/3627; fax: (39-6) 5797-6661.

National activities

Bolivia: Programmes for the elderly

In Bolivia, the National Solidarity and Social Development Board is the body responsible for care for the aged. A public social service and promotional body with administrative, technical and financial autonomy, its principal objective is to implement the Government's social-development policies for the more vulnerable segments of the population, such as children, women and the aged.

The programmes are carried out at two levels: institutional and community. The institutional programme consists of a comprehensive system of assistance for the aged, including the sponsorship by the Government of 20 old people's homes run by religious orders throughout the country. As a part of one project, a questionnaire is being circulated to all the residents of these homes to determine the economic, social and cultural characteristics of this segment of the population.

A European Community food-assistance project assists 25,000 elderly persons. The "Multiple-activity centre" or "Grandparents club" project, which is financed by the United Nations Trust Fund for Ageing, has been underway since 1988 and involves around 1,300 persons. One of the groups in the project, composed of widows of distinguished veterans and aged persons of the community, is engaged in the production of alpaca thread and the manufacture of shawls, cravats and rugs. Another group, also composed of widows and aged persons of the community, produces table linen. In yet another group, war widows are producing crocheted and knitted work. It is hoped to extend the operation to the central region of Bolivia, namely to Cochabamba, Santa Cruz and Chuquisaca. For this project, groups have already been formed in nine regions which are establishing grandparents clubs.

Another ongoing project is the "Assistance and protection project for the aged", which seeks to inform the community of the rights of older persons, as well as the responsibilities of the family towards these persons.

Canada: Research Network

The Canadian Ageing Research Network (CARNET) is a research programme funded by the Government of Canada through its Networks of Centres of Excellence Programme. CARNET brings together Canada's leading experts from various disciplines, such as psychology, sociology, gerontology, economics and geography, in a number of integrated research programmes to investigate ways of fostering independence and productivity in an ageing society.

The network is based at the University of Toronto and combines the efforts of 23 researchers from 10 universities across Canada, 2 corporate partners, a number of corporate affiliates and 3 national liaison partners.

CARNET is comprised of the following four linked research groups:

(a) The Formal Support Research Group at the University of Manitoba, which conducts research on the

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Bolivian women at a multiple-activity centre

development of new and innovative products and services for an ageing population, including home-care services which enhance the independent living of the elderly;

(b) The Work and Eldercare Research Group at the University of Guelph, which examines the diverse ways in which people combine paid employment with the care of elderly relatives, the effects of eldercare responsibilities on work performance and broader labour-force patterns. In addition, this group analyses the impact of a range of public and private initiatives designed to optimize the balance between work and family life;

(c) The Cognitive Function Research Group at the University of Toronto, which examines the impact of the working environment on cognitive performance and work behaviour of the elderly in seniors' institutions;

(d) The Network Infrastructure, also at the University of Toronto, which provides support by stimulating the linking of the research activities between the Groups. The Network Infrastructure also conducts research focused on the policy implications of the CARNET research findings.

Further information is available from: CARNET, c/o Centre for Studies on Ageing, University of Toronto, 455 Spadina Avenue, Suite 305, Toronto, Ontario M5S 2G8, Canada. Telephone: 416-978-7910; fax: 416-978-4771.

Ghana: Country survey of the elderly

As their contribution to Developmental Implications of Demographic Change: Global Population Ageing, an ongoing UNOV/CSDHA project co-financed by the United Nations Population Fund and the Government of Sweden, HelpAge International and the American Association of Retired Persons have each pledged $US 7,000 to co-finance a country survey of the elderly in Ghana. The survey is being carried out by the African Society of Gerontology with assistance from CSDHA.

The study will assess, by means of a nationally representative sample survey, the nature and extent of the economic, social and cultural contributions made by persons aged 60 and over at the individual, family and community levels in Ghana.

In terms of an overall objective, the project will elaborate important aspects of development and population planning, identifying specific developmental implications of the process of population ageing and suggesting policy options to respond to this process. The survey results will be used as an empirical basis for the development of such options and for the identification of areas for programme development.

Japan: Women and ageing symposium

The two-day International Symposium on Ageing, of Women, by Women and for All, sponsored by the Japan Well-Ageing Association, was held in Tokyo at the Asahi Mullion Hall on 6 and 7 September 1991. Women from five countries elaborated strategies on how politics, administration, welfare and medical care should be changed in order to cope with an ageing society. The statements made by the panellists, together with suggestions and proposals from the audience, were incorporated into a 15-item declaration, an English version of which is reproduced below:

"The International Symposium on Ageing, of Women, by Women and for All resolves to create an ageing society in which the political system and the culture supports an improved life for all people with special attention to the needs of older citizens. Furthermore, we will work towards achieving the following:

"(a) We must change from a materialistic society to a caring society concerned for all of its members, especially those who are vulnerable or unable to care for themselves;

"(b) We must establish a national social-security system that assures an adequate income, rather than expect each older person to depend on his or her own life savings for retirement income;

"(c) Instead of depending exclusively on relatives in old age, we should expand the support network to include friends, neighbours and the community;

"(d) Care-giving responsibilities should include men and not be confined to women alone;

"(e) Shift from accepting the 'token' women in elected political

office to electing a significant proportion of women to establishing a quota of at least between 30 and 40 per cent of women;

"*(f)* Shift from placing older persons in hospital-like homes for the aged to facilities with a more home-like environment that assures privacy and space for personal belongings;

"*(g)* Stop addressing older persons as 'Mom', 'Pop', 'Auntie' etc. Older citizens should instead be called by their own names with the respectful title of Mr., Mrs., Ms. or Miss, as appropriate;

"*(h)* Promote rehabilitation to enable bedridden persons to use wheelchairs or relearn to stand and to walk;

"*(i)* Remove the environmental and psychological barriers that make older people prisoners in their own homes, enabling older citizens to continue active participation in community life;

"*(j)* Eliminate the barriers created by bureaucratic red tape to give older citizens immediate access to services;

"*(k)* Eliminate the current fragmentation of services and programmes by consolidating and coordinating governmental agencies responsible for serving the elderly (and the general public);

"*(l)* Move from an educational system that emphasizes competition to a more humane system that encourages the formation of a more well-rounded person;

"*(m)* Change education for competition to education for symbiosis;

"*(n)* Move from isolation to independence with solidarity;

"*(o)* Create solidarity among all those who care for the elderly in order to build an international movement of carers."

Source: Asahi News, 22 September 1991.

Rice harvest, Nepal

Photo: ILO/J. Maillard

Nepal: Senior Citizen's Welfare Association

The Senior Citizen's Welfare Association, Nepal (SCWAN) was established in October 1991 as a charitable non-profit organization to provide humanitarian services to senior citizens of Nepal.

The breakdown of the traditional extended family has created a need for organizations to assist the elderly. Among its objectives, SCWAN was created to aid, assist and make arrangements for appropriate and essential amenities for the retired senior citizens of Nepal so that they may be encouraged in leading fulfilling and useful, yet easier lives. Other objectives include providing adequate housing, raising public awareness and exchanging knowledge, skills and information.

The President of SCWAN, Dr. Leela Devi, encourages advice and assistance "in thoughts and things" from interested persons and organizations.

For further information, contact: SCWAN, GPO Box 2530, Kathmandu, Nepal.

Spain

Ibero-American conference

An Ibero-American intergovernmental conference on policies for the elderly and the disabled in Spain and the Spanish-speaking countries of Latin America was held at Madrid from 11 to 13 September 1991. The conference was followed by a seminar, held from 17 to 25 September, that was designed to inform the Latin American representatives about the work of the Spanish National Institute for Social Services (INSERSO).

Organized by INSERSO under an agreement between the Ministry of Social Affairs and the Ministry of Foreign Affairs, the conference had the following three main objectives: *(a)* to increase knowledge concerning policies and programmes for the elderly and the disabled in participating countries; *(b)* to identify needs for international cooperation; and *(c)* to draw up a joint document describing national social services policies.

Serious concern was expressed during the conference about the inadequacy of the financial, material and human resources allocated to the care of the elderly. The participants at

Street musician, Vienna

Photo: N. Amberg

the conference acknowledged the magnitude of the economic crises currently affecting so many of the participating countries and exacerbating the already difficult circumstances of elderly people.

Among the main recommendations were that general policies for comprehensive care of the elderly should be defined and that a programmatic reference framework should be established in each of the Ibero-American countries, not as a substitute for national policies but rather to ensure that such policies converged on common guidelines of a general nature. Those policies should respect certain criteria based on an analysis of Ibero-American realities in terms of comprehensive care for the elderly. The main criteria would be the need to adopt a global approach to the ageing process and the strengthening of intersectoral and inter-institutional coordination, thus ensuring the optimum use of the scant resources available.

Policies should include economic protection, health care, integration of social services, residential alternatives, leisure-time activities and social participation, with the ultimate objective of achieving full social integration and acceptable living standards for the elderly. It was agreed to work towards establishing an Ibero-American network with the following goals: *(a)* to establish and maintain an Ibero-American information system to facilitate the exchange of information, documentation, publications etc.; *(b)* to provide technical assistance; *(c)* to establish an Ibero-American resource fund; and *(d)* to publish a liaison bulletin so as to encourage the development of comprehensive care services for the elderly in the Ibero-American countries by multilateral technical cooperation and exchanges of experience for technical cooperation in the care of the elderly.

Cultural Committee of the Elderly '92

The "Aulas de Tercera Edad" of the University of the Third Age at Santa Cruz de Tenerife report that on 4 October 1991, the Cultural Committee of the Elderly '92 was established for the purpose of celebrating the tenth anniversary of the International Plan of Action on Ageing. The current academic course will be one of the main activities of this Committee.

Sweden: "Walking for Life" campaign

A new national association for the elderly was formed in November 1991. The association, Ageing is Growing, hopes to change public attitudes towards the elderly and towards the ageing process. The association's goals are the following: equal rights for the elderly to further education; preventive health care for the elderly; preparation for active senior years; organized offering of jobs and assignments for the elderly in all municipalities; flexibility in both directions when determining the time for each individual's retirement; and removal of barriers to gainful employment for the elderly, such as contract regulations and taxation.

Current research in gerontology shows that many people retire from working life with undiminished vitality and working spirit, and that an increasing number of people retain the capacity to work until an advanced age. Unfortunately, this resource is largely unexploited. With a healthy lifestyle, elderly people can remain active well into retirement.

In the past 45 years, the incidence of hip fracture has grown for elderly women. This is believed to be due to the sedentary lifestyle characteristic of the city dweller, a lifestyle that can lead to premature ageing of muscle and bone.

The beneficial effects of walking on the body and on the mind have been scientifically established. It improves metabolism, lowers the risk of diabetes and reduces lipid levels in the blood. A daily walk of between 30 minutes and one hour can counteract the effects of the ageing process and dramatically improve the quality of our lives.

A person who has exercised during his or her youth, however, has no guarantee against brittle bones later in life. It is necessary to exercise regularly throughout a lifetime. In order to promote awareness of the benefits of regular walking, the association started a country-wide "Walking for Life" campaign that culminated in a national walk on 17 May 1992.

For more information, contact: National Association "Ageing is Growing", Svenska Kommunförbundet, S-11882 Stockholm, Sweden.

Syrian Arab Republic: "House of Happiness"

Enormous demographic pressures, such as the virtual doubling of the proportion of the population over the age of 60 in the past 10 years, coupled with war-related migration and social instability have made alternative forms of care for the elderly more socially acceptable in the Syrian Arab Republic. That country has now its first residential home for the elderly, the House of Happiness for the Retired. This home represents a significant break with tradition and the cultural taboos that exist in relation to the care of the elderly.

The Women's General Aid Society, established in the 1940s, was the prime mover in setting up the home. The Society consists of a group of women who began lobbying for political and economic support for the idea as early as 1976. Land was provided by the State in 1978 in the suburbs of Damascus and money for the building was raised mainly by the support of individual business people and philanthropists.

The home has a capacity for 120 people and caters to a wide range of

social backgrounds. The Society's charitable status requires that 35 per cent of places be allocated to those unable to pay. One of the basic rules of the establishment is that to be accepted as a resident a person has to be of sound mind and body. Any specialized nursing care has to be arranged entirely by the individual concerned.

Staff include four full-time social workers, one of whom is in residence, a daily physiotherapist and a general practitioner who has a daily clinic and is in residence one night a week. Special arrangements have been made with a local hospital to treat falls and injuries.

With its relaxed and friendly atmosphere, the home might be taken for a holiday home. It has a library and a beautifully landscaped garden, a real luxury in a city with few open spaces.

Source: Age Action, No. 5, 1991, HelpAge International quarterly bulletin.

United States of America: Ageing in New York

Prema Mathai-Davis, City Commissioner at the Department for the Ageing in New York, spoke at the Preparatory Meeting for the International Conference on Population Ageing, held at United Nations Headquarters from 15 to 16 August 1991. The following is an excerpt from her welcoming statement:

"The sheer numbers and diversity of the 1.3 million older New Yorkers have made New York a veritable laboratory for the ageing experience. Many of the issues on population ageing now emerging in other countries are challenges that have confronted us in the United States, and especially in New York City, over the past two decades.

"There has been a dramatic greying of New York City's population. The fastest growing age cohort is the 85 and older age group, projected to increase 123 per cent by the year 2000.

"New York City's elderly are increasingly more ethnically and racially diverse, which requires that services have to be developed in culturally sensitive ways.

"Since we are a society in which the nuclear family predominates, one out of three older New Yorkers frequently live out their later lives alone. Yet, over 90 per cent of these older people report involvement with their families, who struggle, often at a long distance, to give support and care.

"Finally, while one fourth of older New Yorkers suffer from some physically limiting impairment, three quarters report that they are in good health and are able to care for themselves and others.

"We find two distinct older groups emerging: those who are vulnerable and at risk because of greater impairment, poor health and low income, for instance; and those who are relatively healthy, vigorous and active, many of whom are seeking avenues for involvement and participation as productive members of their communities.

"The challenge, therefore, is to develop strategies and service innovations to maximize the potential of those seeking active roles in society, while at the same time ensuring security and dignity for those most vulnerable. In developing programmes and services, we have to examine how to assure cost-effective quality of care that is sensitive to both the local and the cultural differences within each community.

"We strongly believe that seniors are a resource that we can draw upon to help solve our city's problems. That is why many of our programmes put senior citizens in environments where they are helping people of all ages who need assistance, from infants, children and teenagers to other older people.

"We have, for example, a drop-out prevention programme, where older people serve as mentors for high-school students. We have programmes where older people become surrogate parents and provide much-needed parenting skills for young teenage mothers who have no one to turn to for help.

"Our Foster Grandparent Programme, which has seniors caring for babies born with acquired immunodeficiency syndrome (AIDS), is now being expanded to other parts of the country. Seniors are also a tremendous resource for child day-care services.

"While many of these programmes provide volunteer opportunities, we also actively promote the older worker and conduct a large employment programme for older New Yorkers. We are proud to have just established, in cooperation with IBM, the first

(continued on page 10)

Non-governmental organization activities

International Nurses Day

The International Council of Nurses (ICN) urged its member associations to use International Nurses Day on 12 May to focus on "healthy ageing". The Day provided an opportunity for nurses to examine not only the needs of the older adults in their communities but also the resources they offer. It was also an occasion to consider the role played by nurses in the care of the elderly and to identify opportunities for change and innovation.

As "healthy ageing" will be one of the major challenges facing health providers and social policy makers in the years to come, nurses are urged to be at the forefront of this trend by providing quality care to older adults.

ICN has produced a kit for International Nurses Day 1992, entitled *Healthy Ageing: Trends and Innovations in Nursing Care*. The kit contains summaries of some of the key problems, innovations and issues in nursing care of the ageing adult. The following areas are covered: health promotion; health maintenance; acute care; rehabilitation; care of the very ill and dying; and education, research and policy implications.

Further information may be obtained from: ICN Headquarters, 3, place Jean-Marteau, CH-1201 Geneva, Switzerland.

Self-help and community care for older women in the Caribbean*

Introduction

In terms of overall circumstances and life experiences, the Jamaican older woman (defined, for this article, as women over 60 years of age) often differs considerably from her male counterpart. She is normally the main carer in her usually extended family, caring for both children and grandchildren. Older women are often the mainstay of the informal labour system, where they predominate, and continue to work in order to supplement the income of the household instead of retiring.

In Jamaica, life expectancy for women is higher and education levels are lower than those of men. As a result of multiple pregnancies, women have different social and health problems. Jamaica is often considered a matriarchal society and has a high proportion of female heads of households, often with no male permanently present.

A recent survey indicates that the extended-family system is still strong among the elderly population, with only a small percentage of the population living in a nuclear family situation. Of those surveyed, 93 per cent indicated that they had a family member or friend on whom they could depend in times of need. This type of mutual support lends itself to the community-based and self-help programmes that are discussed in this paper.

Development to many people connotes mere economic growth. For others, however, the term has social and cultural implications too. In discussing development and the integration of older people, each of these three aspects is equally important. For the purposes of this article, the term "productive ageing" is taken to mean older people continuing to contribute economically, socially and culturally to themselves, their communities and their country.

*Based on an article by Denise Eldemire, who lectures at the Department of Social and Preventive Medicine, University of the West Indies, Mona, Kingston 7, Jamaica.

Assessing community care programmes

Older people have needs, as everybody has. Unfortunately, opportunities to meet these needs are not always available to them, especially with regard to emotional and social needs. The later years can be a time of great loss: death of family and friends, loss of status through retirement and a decline in living standards owing to reduced incomes and fixed pensions. Anything that helps older women to feel needed and wanted will reduce the emotional burden.

Objective assessment of the real value of community care programmes to older women who have traditionally been carers is problematic. Some suggested areas of measurement are as follows:

(a) The self-image of participants in a programme;

(b) The productive roles of women;

(c) Changes in the family and the community;

(d) Emerging leadership with the group;

(e) Self- and group-management potential developed in the course of a programme.

Community care and the "Golden Age" clubs

A successful community-care programme needs actively participating clients, as well as volunteers, a committed leader and a good support system. Jamaica has a system of "Golden Age" clubs, operated by the National Council for the Aged, the Government's advisory body. The membership of these clubs is predominantly female. Projects are identified by its members.

One such club, headed by a 78-year-old woman, demonstrates clearly how successful community care can be. With 143 members (123 women and 20 men), the club operates from the house of its president in a semi-rural area of Kingston.

The club first became involved in providing first aid soon after its formation in 1983. At that time, the nearest health centre was several miles away and more significantly, in order to get there, people had to walk over a hill. A first-aid box was established at the club and persons came for dressings and with minor complaints. A friend in the United States of America has kept the box supplied with liniments, pain tablets, vitamins and dressings.

Club members operate a visiting service for older people who are ill or confined to their homes. These persons are selected by club members at the bimonthly meetings. The needs of the person determine the frequency of visits, and during the visit whatever help is needed is given as far as this is practicable. The tasks performed include feeding, bathing, washing clothes and accompanying the person to the health clinic or hospital.

A feature of the elderly population in Jamaica is their reliance on religion as a source of comfort. Quite often a sick person expresses regret at not being able to attend church. A "cottage meeting" is then organized by taking a lay preacher and at least 10 club members to the house and holding a service at the person's home. The club president reports that there are 15 denominations represented among the membership, and attributes the club's success to its non-political and non-denominational status.

Involving children

The club is also contributing to the development of school children by a programme in the all-age school nearby. The objectives of this programme are as follows: *(a)* to help needy children; *(b)* to educate the young people about older people and the ageing process; and *(c)* to foster a spirit of volunteering and a community spirit.

The school identifies poor, needy children who are unable to pay the cost of the school lunch, and the club provides them with a cooked lunch each Wednesday and a snack on Tuesdays. The club members have not been able to extend the programme to five days weekly, not because of inadequate financing, as might be expected, but because not enough members could commit themselves to a roster on more than one day a week. The club members are committed to

their own grandchildren on the other days.

The unique component of the school's programme is the Junior Golden Age Club, which is formed by members of the ninth grade each year. Membership is voluntary and rotates yearly. Leadership is given at the school by a teacher who is a volunteer with the Golden Age Club. The members are early teenagers and the majority have elderly relatives living at home with them. The children meet with the club members and are assigned a housebound elderly person in the community for the year. The child delivers a cooked lunch to this person each Wednesday, and then visits each Saturday to do chores and read to the person. Chores include feeding, shopping, washing and miscellaneous minor household tasks, such as changing light bulbs.

This experience exposes youngsters to older persons and teaches them to be compassionate and understanding. By interacting closely with older people, they learn to respect and appreciate them. Youngsters consider the programme very valuable and membership has been growing steadily each year.

Community-development project

Every year the club also identifies a community-development project. In 1991, for instance, a 160-foot long footpath was built to replace one that had been washed away by Hurricane Gilbert in 1988. The club members solicited gifts of cement, gravel, food and free labour, and raised $J 2,000. When the footpath was finished, it was embellished with plants. This project demonstrates true community development, as the labour was provided by tradesmen in the area who had been chosen and whose activities were coordinated by the club members.

Self-help activities

The community projects are supported by the self-help activities of members who make and sell cards to raise funds for the projects. Furthermore, the handicraft produced by members is sold to supplement the individual incomes of members. In this way, the elderly persons help the community and become independent. The success of this community project is due to the commitment of members and to the fact that members have identified individual needs that the volunteering and caring activities satisfy.

At the desert's edge, Niger Photo: SOS Sahel/R. Barker

In addition to accomplishing community projects, group activities help to meet people's need for contact and association with other people. The groups satisfy the basic human need for affection, recognition, security and adventure. Groups also provide an excellent opportunity for older people to fill the gap created by the loss of a partner, friends or work.

To combat some of the negative attitudes towards ageing and to remove fears of ageing from the minds of younger people, further ideas for inter-generational activities need to be found. The concept of productive ageing will be considerably strengthened if it is assimilated as a feature of old age by persons long before they themselves become old.

Keys to success

A successful project generally exhibits certain characteristics. It is typically both non-denominational and non-political. The project usually benefits from strong leadership and the persons involved tend to be dedicated, hard-working volunteers with a long-term commitment to the project, the goals of which have been agreed upon by the group. The project generally enjoys a high level of community awareness and acceptance, and in providing high-quality service it meets not only community needs, but also the needs of persons involved in project activities.

Income-generating self-help programmes

Although for at least a decade social policy and social action have been directed by considerations of the economic vulnerability of women, little attention has been paid to the productive capacity of older women and to projects involving their potential for making an economic contribution. Income-generating activities for older women mobilize women in productive roles that reduce their economic vulnerability and group work invariably reduces social vulnerability, loneliness and depression.

In Jamaica, those income-generating activities that incorporate the traditional roles and responsibilities of women are the most likely to succeed. Those roles include the following: delivery of social services, such as caring for children, the sick or disabled; cooking; gardening and agriculture; and working in handicrafts activities.

A Golden Age Club provides an entry point for developing an income-generating project, whether age-specific or age-integrated. A bammy-making project (bammy is a type of

bread) in a rural area of Jamaica is an age-integrated project that began in early 1990 and has been growing in strength ever since. It began with six members and without any financial support. Its aims and objectives are as follows: *(a)* to generate income for the participants; *(b)* to share the skills of senior citizens with interested younger persons; *(c)* to provide funds for the club; and *(d)* to provide services to needy elderly.

The number of participants has already grown from 6 to 12. The project is monitored by two coordinators and the organizer for the National Council for the Aged. The accounting is very detailed, probably because of the reporting requirements of a donor agency that gave $J 4,000 towards the purchase of utensils when the project was three months old.

In establishing income-generating projects, the existence of a market for the product should always be determined in advance. A possible reason for the success of this project is that bammies constitute a very important staple in the diet of Jamaican people, so there is always a market for them. As bammy-making is a skill that is passed down from one generation to the next, the participation of older women is vital to the success of the project.

Features of successful projects

An examination of less successful income-generating projects highlights the importance of the following features: *(a)* good management principles and planning; *(b)* good financial planning; *(c)* sound technical expertise; *(d)* hard-working, skilled workers; *(e)* thorough pre-planning by technical advisers; *(f)* a well-defined community-building focus with the goal of promoting permanent change; and *(g)* training inputs that cover non-technical areas, such as relationships and group interaction.

A bee-keeping project, again in a rural area, which has received far more financial help than the bammy project, has not been anywhere near as successful. Bee-keeping is a highly skilled activity, and despite the fact that a large export market exists for honey, this project has not been successful. The initiators had neither expertise in the area, training in bee-keeping nor any external advisory help. The project does, however, meet the social needs of the participants and it continues to operate.

Conclusions and implications for policy

Self-help and community-care projects involving older women can be of immeasurable value both to the community and to the older women themselves. While helping the community to meet the personal needs of the women, these activities promote the use of untapped human resources, creating economic independence for the participants, as well as raising their self-esteem.

Implications for policy might be summarized as follows:

(a) Older women must be viewed as an asset, not a burden;

(b) Community-based groups provide a good starting point for projects;

(c) Projects and activities must be planned by the community and the elderly working in concert, and not imposed from outside;

(d) Inter-generational activities will help sensitize future cohorts of elderly women, with the hope of motivating them to plan early;

(e) Integration of older women into development should be viewed as being mutually beneficial to both the community and the individual;

(f) The negative attitude of society towards ageing has to be confronted and changed.

At the desert's edge, Mali Photo: SOS Sahel/A. Mauro

National activities *(continued from page 7)*

training centre in the United States for older workers to develop office technology skills. Our Eldercare Programme assists businesses in developing programmes to address the needs of employees who are juggling their child-care, elder-care and work responsibilities.

"Health promotion and prevention is an area that we consider important to invest resources in and we train older people as leaders to conduct health promotion activities for their peers.

"Although each country's response to the challenges of an ageing population will differ to some degree according to its cultural traditions and economic and social systems, all countries share a common goal of maintaining the quality of life in old age. We are all faced with the implications of the prolongation of life."

UNITED NATIONS PRINCIPLES FOR OLDER PERSONS[1]

To add life to the years that have been added to life

The General Assembly,

Appreciating the contribution that older persons make to their societies,

Recognizing that, in the Charter of the United Nations, the peoples of the United Nations declare, *inter alia*, their determination to reaffirm faith in fundamental human rights, in the dignity and worth of the human person, in the equal rights of men and women and of nations large and small and to promote social progress and better standards of life in larger freedom,

Noting the elaboration of those rights in the Universal Declaration of Human Rights,[2] the International Covenant on Economic, Social and Cultural Rights[3] and the International Covenant on Civil and Political Rights[4] and other declarations to ensure the application of universal standards to particular groups,

In pursuance of the International Plan of Action on Ageing, adopted by the World Assembly on Ageing and endorsed by the General Assembly in its resolution 37/51 of 3 December 1982,

Appreciating the tremendous diversity in the situation of older persons, not only between countries but within countries and between individuals, which requires a variety of policy responses,

Aware that in all countries, individuals are reaching an advanced age in greater numbers and in better health than ever before,

Aware of the scientific research disproving many stereotypes about inevitable and irreversible declines with age,

Convinced that in a world characterized by an increasing number and proportion of older persons, opportunities must be provided for willing and capable older persons to participate in and contribute to the ongoing activities of society,

Mindful that the strains on family life in both developed and developing countries require support for those providing care to frail older persons,

Bearing in mind the standards already set by the International Plan of Action on Ageing and the conventions, recommendations and resolutions of the International Labour Organisation, the World Health Organization and other United Nations entities,

Encourages Governments to incorporate the following principles into their national programmes whenever possible:

Independence

1. Older persons should have access to adequate food, water, shelter, clothing and health care through the provision of income, family and community support and self-help.

2. Older persons should have the opportunity to work or to have access to other income-generating opportunities.

3. Older persons should be able to participate in determining when and at what pace withdrawal from the labour force takes place.

4. Older persons should have access to appropriate educational and training programmes.

5. Older persons should be able to live in environments that are safe and adaptable to personal preferences and changing capacities.

6. Older persons should be able to reside at home for as long as possible.

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[1]Based on the International Plan of Action on Ageing, see *Report of the World Assembly on Ageing, Vienna, 26 July-6 August 1982* (United Nations publication, Sales No. E.82.I.16), chap. VI, sect. A.

[2]Resolution 217 A (III).

[3]Resolution 2200 A (XXI).

[4]Ibid.

Participation

7. Older persons should remain integrated in society, participate actively in the formulation and implementation of policies that directly affect their well-being and share their knowledge and skills with younger generations.

8. Older persons should be able to seek and develop opportunities for service to the community and to serve as volunteers in positions appropriate to their interests and capabilities.

9. Older persons should be able to form movements or associations of older persons.

Care

10. Older persons should benefit from family and community care and protection in accordance with each society's system of cultural values.

11. Older persons should have access to health care to help them to maintain or regain the optimum level of physical, mental and emotional well-being and to prevent or delay the onset of illness.

12. Older persons should have access to social and legal services to enhance their autonomy, protection and care.

13. Older persons should be able to utilize appropriate levels of institutional care providing protection, rehabilitation and social and mental stimulation in a humane and secure environment.

14. Older persons should be able to enjoy human rights and fundamental freedoms when residing in any shelter, care or treatment facility, including full respect for their dignity, beliefs, needs and privacy and for the right to make decisions about their care and the quality of their lives.

Self-fulfilment

15. Older persons should be able to pursue opportunities for the full development of their potential.

16. Older persons should have access to the educational, cultural, spiritual and recreational resources of society.

Dignity

17. Older persons should be able to live in dignity and security and be free of exploitation and physical or mental abuse.

18. Older persons should be treated fairly regardless of age, gender, racial or ethnic background, disability or other status, and be valued independently of their economic contribution.

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